## IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12<sup>TH</sup>, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-G
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Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

TA4 - 4:		
For office use Indexed	oniy	
Audited		
Checked		
Computer		

Date

DEPARTMENT	OR OFFI	E RECEIVING	THE GIFT	OR BEQUEST
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Signature

IA Department of Human Rights	•		
Name of Department or Office 321 E 12th Street			
Malling Address	Dos Moines IA 50319 City, Stale, Zip Code		
SIS-281-3274 Area Code & Telephone No.	, ordio, 2.p 0000		
		•	
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE		•	
Kimberly Cheeks			
Name	The state of the s		
Mailing Address (if different from above)	City, State, Zip (If different from above)	<u> </u>	
kim.cheeks@lovva.gov	ony, state, zip (if different from above)		
Email Address	Area Code & Telephone Number (if different from	above)	
ONOR OF GIFT OR BEQUEST:			
Betty E Johnson			
Name			
3380 28th Ave Marion IA 52302-1357			
Mailing Address City, State, Zip Code	12/12/18 \$100.6	ეი	
319 - 360 - 8707 Area Code & Telephone Number	100.	nWalue*	
Area Code & Telephone Number			
broday @msn.com	"Value is defined as "fair market value" of item as a receiving department or office. If no value mark "(	determined b	
mail Address (optional)	Treating department of office. If its value mark to	<i>1,</i> 80°,	
		- THE STATE OF THE	
Provide a description of the gift or bequest and purpose thereof:	VIII.		
Donation - 2019 MLK Event - "I Have a Dream" to be	held in DCM 1/10/10		
	Sub-light Control of the Control of		
Crileria (o use this form:			
Receipt of any gift or bequest that is received by any department of the stat	or received by the Governor on behalf of the class		
,	A STATE OF THE CONTINUE OF PRINCIPLE OF THE STATE.	:	
		•	
tement of Affirmation:	***************************************	<del></del>	
Kimberly Cheeks affirm that the gift or bequest reported above is	accurate. I further affirm that the information concernir	A the donor.	
essment of the fair market value (if applicable) is correct and true to the beg	t of my knowledge.	y me donor i	
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Kin Cheela		1	